APPLICATION FOR APPOINTMENT TO FLOOD PROTECTION AUTHORITY

Mrs Miss First Nan	10	Middle Name	Last Name		
Other names/Alias use	l:				
	Flood Protection Autho	ority East (SLFPAE) ority West (SLFPAW)			
3. Driver's License #:		4. Date of Birth:		-	
5. Social Security #: _		6. Name of Spouse:			
7. Where are you regis	stered to vote? Parish	Ward	Precinct	_	
Party Affiliation					
*NOTE: The informatio	n below will assist in the go	oal of having broad representation of	of the community and	is voluntar	y on your p
3. Race*		9. Sex*			
0. CONTACT INFOR	RMATION				
Home Address:					
	Street	City	State		Zip
Mailing Address:					
	Street	City	State		Zip
Home Phone: ()	Cell: ()		-	
Fax: ()					
Email:					
1. CURRENT EMPL	OYER				
Company:		Title:			
Address:					
 City		Parish		State	Zip
City					-

Email:					
12. WOR Employer		ENCE (Cui	rent to last 10 years) Title/Type of Business	<u>City/State</u>	Date (From – To)
	CATION (Boll (location)	egin with h	nighest grade)	<u>Degree (year)</u>	<u>Major</u>
List any j date (CPA	A, Registered	enses or cer Nurse, P.E.	tificates that you have, the date you, etc.)		icensing agency and expiration
15. MILI	TARY SER	VICE	date and type of discharge		
	ll business, _I u are a curre		al, government and educational	boards, commissioned organ	nizations and societies of
17	Yes	No		arrent residence less than 5 years on a separate sheet of paper	
18	Yes	No	Are you a citizen or legal al	ien of the Unites States?	
19	Yes	No	consultant) with any institut enterprises, non-profit organ present a potential conflict of	s an officer, owner, director, to tions (corporations, firms, par nizations, etc) within the past of interest or appearance of co yes, please explain on a separ	rtnerships, business five years which might onflict of interest with your

20	Yes	No	Do you or a member of your immediate family own or have an interest or part in any business, company or entity conducting business of any kind with the authority or levee district within the territorial jurisdiction of the authority or any of the facilities controlled by the authority or any such district. If yes, please explain on a separate sheet of paper.
21	Yes	No	Do you own real property, personal property, or financial holdings which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain on separate sheet of paper.
22	Yes	No	Have you ever been convicted of a violation of any federal, state, parish or municipal law, regulation or ordinance (including traffic violations for which a fine of \$100.00 or more was imposed, this includes driving under the influence of alcohol and/or drugs)? If yes, please explain on separate sheet of paper.
23	Yes	No	Are you currently under federal, state or local investigation for possible violation of a criminal law or ordinance? If yes, please explain on a separate sheet of paper.
24	Yes	No	Have you ever been disciplined, cited, or sanctioned for a breach of ethics or unprofessional conduct by, or been the subject of a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please explain on separate sheet of paper.
25	Yes	No	Are there any pending complaints against you involving any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please explain on a separate sheet of paper.
26	Yes	No	Have you previously or do you currently serve as a member of any elected body? If yes, please list position and dates held on a separate sheet of paper.
27	Yes	No	Have you previously or are you currently a registered lobbyist? If yes, please list the name(s) of the agency or entity you lobbied and the principal(s) you represent.
28	Yes	No	Have you ever been employed as a public employee of the state or local government? If yes, please identify the employer(s) and the dates of employment on a separate sheet of paper.
29. Pleas	se briefly exp	lain why y	you wish to serve on this board.
30. Are	there any fac	tors that n	nay adversely impact your ability to serve on this board?

31. REFERENCES: List four (4) individuals as references that you have v numbers for each.	worked directly for. Please give name, address and current phone
32. PLEASE ATTACH A COPY OF YOUR CURR	ENT RESUME'***
ACKNOWLEDGEMENT	
participate or engage in political activity to supp support a particular party or issue in an election; political party or faction; make or solicit contrib- active part in the management of the affairs of a	at if appointed to the board for which I have applied, I shall not cort or oppose the election of a candidate for political office; be a member of any national, state, or local committee of any utions for any political party, faction, candidate, or issue; or take political party, faction, candidate, or any political campaign, as my opinion privately and to cast my vote as I desire.
Applicant Signature	Date
AUTHORIZATION AND RELEASE	
extensive investigation of my personal and busing authorize the release of any and all information participated, including information of a confident government or private agencies or individuals. If furnish such information from liability for damage	pertaining to me or businesses in which I ntial or privileged nature in the possession of I hereby release all such agencies or individuals who ges which may result from furnishing the ntion on this form, provided by me, is true to the best
Applicant Signature	 Date